

Conference/Workshop Grant Application Form

Any SAMU member may apply for this grant. Complete this form and submit to the SAMU Office (CCC: 7-292). The grant maximum for individual applicants is **\$300** and a maximum of **5 individuals per conference/workshop**. Each SAMU member applying for a grant must complete and submit their own application form. An e-mail notification regarding the status of your request will be sent within **30 days** after the date of submission.

Contact Information:

Name: _____ Student ID: _____

Program of Study: _____

E-mail: _____ Phone number: _____

Please provide proof of conference costs (e.g. receipts, invoices, print outs of the Conference website, transportation costs, and room rates as provided by hotels are acceptable). Attach these documents to this form upon submission. Please have a SAMU staff initial here as confirmation that you have attached the documents. _____ (Staff Initial)

Application Requirements:

Amount Requested: _____

Provide a brief description of the conference being attended, and how it will enhance your educational experience or that of the wider student body.

Continued on next page

For Office Use Only:	
Date Received:	Time Received:
Date sent to Grant Allocation Sub Committee:	
Decision of the Committee:	

Please note: if approved for a grant, you will be required to provide a 250 word (1 page) review of the conference.

Endorsements (Please provide names and contact information of two references who are supporting this grant application).

Name: _____
 Email: _____
 Phone no.: _____
 Position: _____

Name: _____
 Email: _____
 Phone no.: _____
 Position: _____

Applicant's Signature: _____

Date Signed: _____